

**ARIZONA CORPORATION COMMISSION**  
**UTILITIES DIVISION**

**ANNUAL REPORT MAILING LABEL – MAKE CHANGES AS NECESSARY**

E

**WS-03448A**  
**Rainbow Parks, Inc.**  
**dba Escapees at North Ranch**  
**6825 E Tennessee Avenue, Suite 547**  
**Denver CO 80224**

**ANNUAL REPORT**  
**Water – Sewer**

**FOR YEAR ENDING**

<b>12</b>	<b>31</b>	<b>2009</b>
-----------	-----------	-------------

FOR COMMISSION USE

<b>ANN 04</b>	<b>09</b>
---------------	-----------

5-17-10

5-18-10

## COMPANY INFORMATION

<b>Company Name (Business Name)</b> <u>Rainbow Parks, Inc.</u>			
Mailing Address <u>100 Rainbow Drive</u>			
(Street)			
<u>Livingston</u>	<u>TX</u>	<u>77351</u>	
(City)	(State)	(Zip)	
<u>936-327-9871</u>	<u>936-327-9359</u>		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address _____			
<b>Local Office Mailing Address</b> <u>Same</u>			
(Street)			
<u></u>	<u></u>	<u></u>	
(City)	(State)	(Zip)	
<u></u>	<u></u>	<u></u>	
Local Office Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address _____			

## MANAGEMENT INFORMATION

<input type="checkbox"/> <b>Regulatory Contact:</b> <u>Jason Williamson</u>			
<input type="checkbox"/> <b>Management Contact:</b> <u>Jason Williamson</u> <u>Manager</u>			
(Name) (Title)			
<u>6825 E Tennessee Avenue, Suite 547</u>	<u>Denver</u>	<u>CO</u>	<u>80224</u>
(Street)	(City)	(State)	(Zip)
<u>303-333-1250</u>	<u>303-333-1257</u>		
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address <u>jw@pivotalcompanies.com</u>			
<b>On Site Manager:</b> <u>Pat Carpenter, a Quality Water</u>			
(Name)			
<u>PO Box 264</u>	<u>Williams</u>	<u>AZ</u>	<u>86046</u>
(Street)	(City)	(State)	(Zip)
<u>928-606-0498</u>	<u></u>	<u></u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
Email Address _____			

<b>Statutory Agent:</b> <u>James B Musgrove</u>			
(Name)			
<u>1135 Iron Springs Road</u>	<u>Prescott</u>	<u>AZ</u>	<u>86302-2720</u>
(Street)	(City)	(State)	(Zip)
<u>928-445-5935</u>			
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
<b>Attorney:</b> <u>Michael Patton</u>			
(Name)			
<u>400 E Van Buren Street, Suite 800</u>	<u>Phoenix</u>	<u>AZ</u>	<u>85004</u>
(Street)	(City)	(State)	(Zip)
<u>602-256-6100</u>		<u>602-256-6800</u>	
Telephone No. (Include Area Code)	Fax No. (Include Area Code)	Cell No. (Include Area Code)	
<b>Email Address</b> _____			

### **OWNERSHIP INFORMATION**

Check the following box that applies to your company:

- |  |   |
|--|---|
| <input type="checkbox"/> <b>Sole Proprietor (S)</b>    | <input checked="" type="checkbox"/> <b>C Corporation (C) (Other than Association/Co-op)</b> |
| <input type="checkbox"/> <b>Partnership (P)</b>        | <input type="checkbox"/> <b>Subchapter S Corporation (Z)</b>                                |
| <input type="checkbox"/> <b>Bankruptcy (B)</b>         | <input type="checkbox"/> <b>Association/Co-op (A)</b>                                       |
| <input type="checkbox"/> <b>Receivership (R)</b>       | <input type="checkbox"/> <b>Limited Liability Company</b>                                   |
| <input type="checkbox"/> <b>Other (Describe)</b> _____ |   |

### **COUNTIES SERVED**

Check the box below for the county/ies in which you are certificated to provide service:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> <b>APACHE</b>     | <input type="checkbox"/> <b>COCHISE</b>            | <input type="checkbox"/> <b>COCONINO</b> |
| <input type="checkbox"/> <b>GILA</b>       | <input type="checkbox"/> <b>GRAHAM</b>             | <input type="checkbox"/> <b>GREENLEE</b> |
| <input type="checkbox"/> <b>LA PAZ</b>     | <input type="checkbox"/> <b>MARICOPA</b>           | <input type="checkbox"/> <b>MOHAVE</b>   |
| <input type="checkbox"/> <b>NAVAJO</b>     | <input type="checkbox"/> <b>PIMA</b>               | <input type="checkbox"/> <b>PINAL</b>    |
| <input type="checkbox"/> <b>SANTA CRUZ</b> | <input checked="" type="checkbox"/> <b>YAVAPAI</b> | <input type="checkbox"/> <b>YUMA</b>     |
| <input type="checkbox"/> <b>STATEWIDE</b>  |  |  |

**COMPANY NAME**                      **RAINBOW PARKS, INC.**

**WATER UTILITY PLANT IN SERVICE**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (OC)</b>	<b>Accumulated Depreciation (AD)</b>	<b>O.C.L.D. (OC less AD)</b>
301	Organization			
302	Franchises			
303	Land and Land Rights	12000		12000
304	Structures and Improvements			
307	Wells and Springs	10,000	-6,500	3,500
311	Pumping Equipment	15,703	-6,243	9,460
320	Water Treatment Equipment	2,100	-1,530	570
330	Distribution Reservoirs and Standpipes	74,268	-48,273	25,995
331	Transmission and Distribution Mains	131,387	-85,401	45,986
333	Services			
334	Meters and Meter Installations	18,182	-11,373	6,809
335	Hydrants	3,900	-3,900	0
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	4,981	-4,981	0
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	<b>272,521</b>	<b>-168,201</b>	<b>104,320</b>

This amount goes on the Balance Sheet Acct. No. 108



**WATER CALCULATION OF DEPRECIATION EXPENSE FOR CURRENT YEAR**

<b>Acct. No.</b>	<b>DESCRIPTION</b>	<b>Original Cost (1)</b>	<b>Depreciation Percentage (2)</b>	<b>Depreciation Expense (1x2)</b>
301	Organization			
302	Franchises			
303	Land and Land Rights	12000	0	0
304	Structures and Improvements			
307	Wells and Springs	10,000	5%	500
311	Pumping Equipment	15,703	5%	785
320	Water Treatment Equipment	2,100	1.5%	30
330	Distribution Reservoirs and Standpipes	74,268	5%	3,713
331	Transmission and Distribution Mains	131,387	5%	6,569
333	Services			
334	Meters and Meter Installations	18,182	5%	909
335	Hydrants	3,900	0	0
336	Backflow Prevention Devices			
339	Other Plant and Misc. Equipment			
340	Office Furniture and Equipment	4,981	0	0
341	Transportation Equipment			
343	Tools, Shop and Garage Equipment			
344	Laboratory Equipment			
345	Power Operated Equipment			
346	Communication Equipment			
347	Miscellaneous Equipment			
348	Other Tangible Plant			
	<b>TOTALS</b>	272,521		12,506

This amount goes on the Comparative Statement of Income and Expense \_\_\_\_\_  
Acct. No. 403.

**SEWER UTILITY PLANT IN SERVICE**

Acct. No.	DESCRIPTION	Original Cost (OC)	Accumulated Depreciation (AD)	O.C.L.D. (OC less AD)
351	Organization			
352	Franchises			
353	Land and Land Rights	16,000	0	16,000
354	Structures and Improvements	1,200	-780	420
355	Power Generation Equipment	9,304	-9,148	156
360	Collection Sewers – Force			
361	Collection Sewers – Gravity	116,000	-75,400	40,600
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells	14,706	-9,558	5,148
380	Treatment and Disposal Equip.	228,776	-144,609	84,167
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment	2,995	-2,703	292
390	Office Furniture and Equipment	4,981	-4,981	0
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	<b>TOTALS</b>	393,962	247,179	146,783

This amount goes on the Balance Sheet Acct. No. 108



**SEWER CALCULATION OF DEPRECIATION EXPENSE**

Acct. No.	DESCRIPTION	Original Cost (1)	Depreciation Percentage (2)	Depreciation Expense (1x2)
351	Organization			
352	Franchises			
353	Land and Land Rights	16,000	0	0
354	Structures and Improvements	1,200	5%	60
355	Power Generation Equipment	9,304	10%	930
360	Collection Sewers – Force			
361	Collection Sewers – Gravity	116,000	5%	5,800
362	Special Collecting Structures			
363	Services to Customers			
364	Flow Measuring Devices			
365	Flow Measuring Installations			
370	Receiving Wells	14,706	5%	735
380	Treatment and Disposal Equip.	228,776	5%	11,439
381	Plant Sewers			
382	Outfall Sewer Lines			
389	Other Plant and Misc. Equipment	2,995	5%	150
390	Office Furniture and Equipment	4,981	0	0
391	Transportation Equipment			
393	Tools, Shop and Garage Equip.			
394	Laboratory Equipment			
395	Power Operated Equipment			
398	Other Tangible Plant			
	<b>TOTALS</b>	393,962		19,114

This amount goes on the Comparative Statement of Income and Expense Acct. 403



**BALANCE SHEET**

Acct No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>ASSETS</b>		
	<b>CURRENT AND ACCRUED ASSETS</b>		
131	Cash	\$165,054	\$174,250
134	Working Funds		
135	Temporary Cash Investments		
141	Customer Accounts Receivable	8,157	11,972
146	Notes/Receivables from Associated Companies		
151	Plant Material and Supplies		
162	Prepayments		
174	Miscellaneous Current and Accrued Assets		
	<b>TOTAL CURRENT AND ACCRUED ASSETS</b>	\$173,211	\$186,222
	<b>FIXED ASSETS</b>		
101	Utility Plant in Service	\$658,101	\$666,481
103	Property Held for Future Use		
105	Construction Work in Progress		
108	Accumulated Depreciation – Utility Plant	-383,760	-415,380
121	Non-Utility Property		
122	Accumulated Depreciation – Non Utility		
	<b>TOTAL FIXED ASSETS</b>	\$274,341	\$251,101
	<b>TOTAL ASSETS</b>	<b>\$447,552</b>	<b>\$437,323</b>

**NOTE:** The Assets on this page should be equal to **Total Liabilities and Capital** on the following page.



**BALANCE SHEET (CONTINUED)**

Acct. No.		BALANCE AT BEGINNING OF YEAR	BALANCE AT END OF YEAR
	<b>LIABILITIES</b>		
	<b>CURRENT LIABILITES</b>		
231	Accounts Payable	\$5,638	\$5,693
232	Notes Payable (Current Portion)		
234	Notes/Accounts Payable to Associated Companies		
235	Customer Deposits		
236	Accrued Taxes	1,421	1,361
237	Accrued Interest		
241	Miscellaneous Current and Accrued Liabilities		
	<b>TOTAL CURRENT LIABILITIES</b>	<b>\$7,059</b>	<b>\$7,054</b>
	<b>LONG-TERM DEBT (Over 12 Months)</b>		
224	Long-Term Notes and Bonds	\$0	\$0
	<b>DEFERRED CREDITS</b>		
251	Unamortized Premium on Debt	\$	\$
252	Advances in Aid of Construction		
255	Accumulated Deferred Investment Tax Credits		
271	Contributions in Aid of Construction		
272	Less: Amortization of Contributions		
281	Accumulated Deferred Income Tax		
	<b>TOTAL DEFERRED CREDITS</b>	<b>\$0</b>	<b>\$0</b>
	<b>TOTAL LIABILITIES</b>	<b>\$0</b>	<b>\$0</b>
	<b>CAPITAL ACCOUNTS</b>		
201	Common Stock Issued	\$	\$
211	Paid in Capital in Excess of Par Value		
215	Retained Earnings	440,492	430,268
218	Proprietary Capital (Sole Props and Partnerships)		
	<b>TOTAL CAPITAL</b>	<b>\$440,492</b>	<b>\$430,268</b>
	<b>TOTAL LIABILITIES AND CAPITAL</b>	<b>\$447,551</b>	<b>\$437,322</b>

**WATER COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

<b>Acct. No.</b>	<b>OPERATING REVENUES</b>	<b>PRIOR YEAR</b>	<b>CURRENT YEAR</b>
461	Metered Water Revenue	\$16,374	\$19,832
460	Unmetered Water Revenue	57,652	57,861
474	Other Water Revenues	63	413
	<b>TOTAL REVENUES</b>	<b>\$74,089</b>	<b>\$78,106</b>
	<b>OPERATING EXPENSES</b>		
601	Salaries and Wages	\$15,250	\$0
610	Purchased Water		
615	Purchased Power	12,101	17,108
618	Chemicals	2,566	2,682
620	Repairs and Maintenance	2,333	0
621	Office Supplies and Expense	188	0
630	Outside Services	21,564	34,456
635	Water Testing		
641	Rents		
650	Transportation Expenses		
657	Insurance – General Liability	2,715	7,690
659	Insurance - Health and Life		
666	Regulatory Commission Expense – Rate Case	50	1,304
675	Miscellaneous Expense	197	145
403	Depreciation Expense	11,887	12,506
408	Taxes Other Than Income		
408.11	Property Taxes	0	2,757
409	Income Tax		
	<b>TOTAL OPERATING EXPENSES</b>	<b>\$68,851</b>	<b>\$73,284</b>
	<b>OPERATING INCOME/(LOSS)</b>	<b>\$5,238</b>	<b>\$4,822</b>
	<b>OTHER INCOME/(EXPENSE)</b>		
419	Interest and Dividend Income	\$0	\$0
421	Non-Utility Income	0	92
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense	-937	0
	<b>TOTAL OTHER INCOME/(EXPENSE)</b>	<b>\$-937</b>	<b>\$92</b>
	<b>NET INCOME/(LOSS)</b>	<b>\$4,301</b>	<b>\$4,914</b>

**SEWER COMPARATIVE STATEMENT OF INCOME AND EXPENSE**

Acct. No.	OPERATING REVENUES	PRIOR YEAR	CURRENT YEAR
521	Flat Rate Revenues	\$58,104	\$57,760
522	Measured Revenues	7,154	8,183
536	Other Wastewater Revenues	98	563
	<b>TOTAL REVENUES</b>	\$65,356	\$66,506
	<b>OPERATING EXPENSES</b>		
701	Salaries and Wages	\$15,250	\$0
710	Purchased Wastewater Treatment		
711	Sludge Removal Expense		
715	Purchased Power	11,932	12,493
716	Fuel for Power Production		
718	Chemicals	21,493	-77
720	Materials and Supplies	424	0
731	Contractual Services – Professional	16,211	17,138
735	Contractual Services – Testing	1,658	1,155
736	Contractual Services – Other	18,815	25,682
740	Rents		
750	Transportation Expense		
755	Insurance Expense		
765	Regulatory Commission Expense	50	0
775	Miscellaneous Expense	554	3,473
403	Depreciation Expense	18,521	19,114
408	Taxes Other Than Income		
408.11	Property Taxes	5,719	2,757
409	Income Taxes		
	<b>TOTAL OPERATING EXPENSES</b>	\$-110,627	\$-81,735
	<b>OTHER INCOME/EXPENSE</b>		
419	Interest and Dividend Income	\$	\$
421	Non-Utility Income	682	92
426	Miscellaneous Non-Utility Expenses		
427	Interest Expense		
	<b>TOTAL OTHER INCOME/EXPENSE</b>	\$682	\$92
	<b>NET INCOME/(LOSS)</b>	<b>\$-45,589</b>	<b>\$-15,137</b>

COMPANY NAME RAINBOW PARKS, INC.

**SUPPLEMENTAL FINANCIAL DATA**  
**Long-Term Debt**

	LOAN #1	LOAN #2	LOAN #3	LOAN #4
Date Issued				
Source of Loan				
ACC Decision No.				
Reason for Loan				
Dollar Amount Issued	\$	\$	\$	\$
Amount Outstanding	\$	\$	\$	\$
Date of Maturity				
Interest Rate	%	%	%	%
Current Year Interest	\$	\$	\$	\$
Current Year Principle	\$	\$	\$	\$

Meter Deposit Balance at Test Year End                      \$ \_\_\_\_\_

Meter Deposits Refunded During the Test Year                      \$ \_\_\_\_\_

<b>COMPANY NAME RAINBOW PARKS, INC.</b>	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

## **WATER COMPANY PLANT DESCRIPTION**

### **WELLS**

<b>ADWR ID Number*</b>	<b>Pump Horsepower</b>	<b>Pump Yield (gpm)</b>	<b>Casing Depth (Feet)</b>	<b>Casing Diameter (Inches)</b>	<b>Meter Size (inches)</b>	<b>Year Drilled</b>
55-506823	30	150	10			

\* Arizona Department of Water Resources Identification Number

### **OTHER WATER SOURCES**

<b>Name or Description</b>	<b>Capacity (gpm)</b>	<b>Gallons Purchased or Obtained (in thousands)</b>
N/A		

<b>BOOSTER PUMPS</b>		<b>FIRE HYDRANTS</b>	
<b>Horsepower</b>	<b>Quantity</b>	<b>Quantity Standard</b>	<b>Quantity Other</b>
15	2		

<b>STORAGE TANKS</b>		<b>PRESSURE TANKS</b>	
<b>Capacity</b>	<b>Quantity</b>	<b>Capacity</b>	<b>Quantity</b>
10,000	1	10,000	1
60,000	1		

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME RAINBOW PARKS, INC.</b>	
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

**WATER COMPANY PLANT DESCRIPTION (CONTINUED)**

**MAINS**

Size (in inches)	Material	Length (in feet)
2		
3		
4	PVC	18,643
5		
6	PVC	290
8		
10		
12		

**CUSTOMER METERS**

Size (in inches)	Quantity
5/8 X 3/4	436
3/4	
1	
1 1/2	
2	
Comp. 3	
Turbo 3	
Comp. 4	
Turbo 4	
Comp. 6	
Turbo 6	

**For the following three items, list the utility owned assets in each category for each system.**

**TREATMENT EQUIPMENT:**

---

---

---

---

---

---

**STRUCTURES:**

---

---

---

---

---

---

**OTHER:**

---

---

---

---

---

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

COMPANY NAME: RAINBOW PARKS, INC.

Name of System:

ADEQ Public Water System Number:

**WATER USE DATA SHEET BY MONTH FOR CALENDAR YEAR 2009**

MONTH	NUMBER OF CUSTOMERS	GALLONS SOLD (Thousands)	GALLONS PUMPED (Thousands)	GALLONS PURCHASED (Thousands)
JANUARY	371	1,197,769	1,197,769	0
FEBRUARY	395	1,170,630	1,170,630	0
MARCH	386	1,298,610	1,298,610	0
APRIL	391	1,653,640	1,653,640	0
MAY	403	1,092,290	1,092,290	0
JUNE	399	1,033,816	1,033,816	0
JULY	397	1,260,715	1,260,715	0
AUGUST	400	1,061,130	1,061,130	0
SEPTEMBER	395	1,194,520	1,194,520	0
OCTOBER	398	1,595,830	1,595,830	0
NOVEMBER	401	2,457,460	2,457,460	0
DECEMBER	401	1,675,873	1,675,873	0
TOTALS →		16,692,283	16,692,283	0

What is the level of arsenic for each well on your system? .03 mg/l

*(If more than one well, please list each separately.)*

If system has fire hydrants, what is the fire flow requirement?      GPM for      hrs

If system has chlorination treatment, does this treatment system chlorinate continuously?

( ) Yes ( X ) No

Is the Water Utility located in an ADWR Active Management Area (AMA)?

( ) Yes ( X ) No

Does the Company have an ADWR Gallons Per Capita Per Day (GPCPD) requirement?

( ) Yes ( X ) No

If yes, provide the GPCPD amount:                                     

***Note: If you are filing for more than one system, please provide separate data sheets for each system.***

<b>COMPANY NAME:</b>	<b>RAINBOW PARKS, INC.</b>
<b>Name of System:</b>	<b>ADEQ Public Water System Number:</b>

**UTILITY SHUTOFFS / DISCONNECTS**

MONTH		Termination without Notice R14-2-410.B	Termination with Notice R14-2-410.C	OTHER
JANUARY				
FEBRUARY				
MARCH				
APRIL				
MAY				
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				
<b>TOTALS →</b>		<b>0</b>	<b>0</b>	<b>0</b>

OTHER (description):

---



---



---



---



---



---



---



**COMPANY NAME RAINBOW PARKS, INC.**

**Name of System:**

**Wastewater Inventory Number (if applicable):**

**WASTEWATER COMPANY PLANT DESCRIPTION**  
**TREATMENT FACILITY**

<b>TYPE OF TREATMENT</b> (Extended Aeration, Step Aeration, Oxidation Ditch, Aerobic Lagoon, Anaerobic Lagoon, Trickling Filter, Septic Tank, Wetland, Etc.)	Extended aeration
<b>DESIGN CAPACITY OF PLANT</b> (Gallons Per Day)	55,000

**LIFT STATION FACILITIES**

<b>Location</b>	<b>Quantity of Pumps</b>	<b>Horsepower Per Pump</b>	<b>Capacity Per Pump (GPM)</b>	<b>Wet Well Capacity (gals)</b>
5 miles south of Congress on Hwy 89	2	1	37	5,500

**FORCE MAINS**

<b>Size</b>	<b>Material</b>	<b>Length (Feet)</b>
4-inch	PVC	240
6-inch		

**MANHOLES**

<b>Type</b>	<b>Quantity</b>
Standard	39
Drop	

**CLEANOUTS**

<b>Quantity</b>
2

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME</b> RAINBOW PARKS, INC.	
<b>Name of System:</b>	<b>Wastewater Inventory Number (if applicable):</b>

**WASTEWATER COMPANY PLANT DESCRIPTION (CONTINUED)**

**COLLECTION MAINS**

Size (in inches)	Material	Length (in feet)
4	PVC	18,643
6		
8	PVC	290
10		
12		
15		
18		
21		
24		
30		

**SERVICES**

Size (in inches)	Material	Quantity
4	PVC	436
6		
8		
12		
15		

**FOR THE FOLLOWING FIVE ITEMS, LIST THE UTILITY OWNED ASSETS IN EACH CATEGORY  
PER WASTEWATER SYSTEM**

<b>SOLIDS PROCESSING AND HANDLING FACILITIES</b>	
<b>DISINFECTION EQUIPMENT</b> (Chlorinator, Ultra-Violet, Etc.)	Chlorination (tablet)
<b>FILTRATION EQUIPMENT</b> (Rapid Sand, Slow Sand, Activated Carbon, Etc.)	
<b>STRUCTURES</b> (Buildings, Fences, Etc.)	Blower pump building; fence surrounding chain link treatment / disposal area
<b>OTHER</b> (Laboratory Equipment, Tools, Vehicles, Standby Power Generators, Etc.)	Standby power generator

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

**COMPANY NAME RAINBOW PARKS, INC.**

**Name of System:**

**Wastewater Inventory Number (if applicable):**

**WASTEWATER FLOWS**

<b>MONTH/YEAR (Most Recent 12 Months)</b>	<b>NUMBER OF SERVICES</b>	<b>TOTAL MONTHLY SEWAGE FLOW</b>	<b>SEWAGE FLOW ON PEAK DAY</b>
<b>January</b>	371	620,000	20,000
<b>February</b>	395	560,000	20,000
<b>March</b>	386	620,000	20,000
<b>April</b>	391	600,000	20,000
<b>May</b>	403	434,000	14,000
<b>June</b>	399	300,000	10,000
<b>July</b>	397	272,800	8,800
<b>August</b>	400	328,600	10,600
<b>September</b>	395	348,000	11,600
<b>October</b>	398	310,000	10,000
<b>November</b>	401	645,000	21,500
<b>December</b>	401	620,000	20,000

**PROVIDE THE FOLLOWING INFORMATION AS APPLICABLE  
PER WASTEWATER SYSTEM**

<b>Method of Effluent Disposal</b> (leach field, surface water discharge, reuse, injection wells, groundwater recharge, evaporation ponds, etc.)	
<b>Groundwater Permit Number</b>	G000113
<b>ADEQ Aquifer Protection Permit Number</b>	P101870
<b>ADEQ Reuse Permit Number</b>	
<b>EPA NPDES Permit Number</b>	

***Note: If you are filing for more than one system, please provide separate sheets for each system.***

<b>COMPANY NAME:</b>	<b>RAINBOW PARKS, INC.</b>
<b>Name of System:</b>	<b>Wastewater Inventory Number (if applicable):</b>

**UTILITY SHUTOFFS / DISCONNECTS**

MONTH		Termination without Notice R14-2- 609.B	Termination with Notice R14-2- 609.C	OTHER
JANUARY				1
FEBRUARY				
MARCH				
APRIL				
MAY				1
JUNE				
JULY				
AUGUST				
SEPTEMBER				
OCTOBER				
NOVEMBER				
DECEMBER				3
<b>TOTALS →</b>		<b>0</b>	0	5

OTHER (description):

---



---



---



---



---



---

**PROPERTY TAXES**

Amount of actual property taxes paid during Calendar Year 2009 was: \$ 0

Attach to this annual report proof (e.g. property tax bills stamped "paid in full" or copies of cancelled checks for property tax payments) of any and all property taxes paid during the calendar year.

If no property taxes paid, explain why. Management office did not receive property tax forms until late  
2009; property taxes were paid in 2010

**VERIFICATION  
AND  
SWORN STATEMENT**  
Taxes

**VERIFICATION**

**STATE OF COLORADO**

**I, THE UNDERSIGNED**

**OF THE**

COUNTY OF (COUNTY NAME) **DENVER**

NAME (OWNER OR OFFICIAL) TITLE **JASON WILLIAMSON, MANAGER**

COMPANY NAME **RAINBOW PARKS, INC.**

**DO SAY THAT THIS ANNUAL UTILITY PROPERTY TAX AND SALES TAX REPORT TO THE  
ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH  
**12**

DAY  
**31**

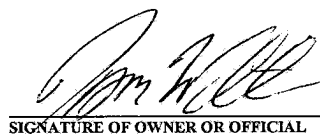
YEAR  
**2009**

**HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS,  
PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY  
EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND  
CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE  
PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY  
MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE,  
INFORMATION AND BELIEF.**

**SWORN STATEMENT**

**I HEREBY ATTEST THAT ALL PROPERTY TAXES FOR SAID COMPANY ARE CURRENT  
AND PAID IN FULL.**

**I HEREBY ATTEST THAT ALL SALES TAXES FOR SAID COMPANY ARE CURRENT AND  
PAID IN FULL.**



SIGNATURE OF OWNER OR OFFICIAL

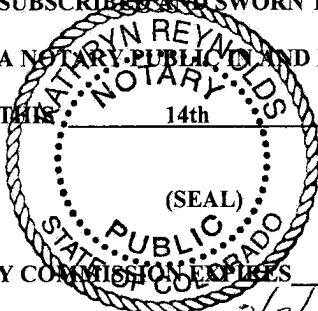
**303-333-1250**

TELEPHONE NUMBER

**SUBSCRIBER AND SWORN TO BEFORE ME**

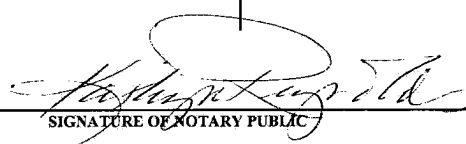
**A NOTARY PUBLIC AND FOR THE COUNTY OF DENVER**

THIS **14th** DAY OF **May**, 2010



MY COMMISSION EXPIRES **2/13/11**

My Commission Expires **2/13/11**



SIGNATURE OF NOTARY PUBLIC

COMPANY NAME: RAINBOW PARKS, INC. YEAR ENDING 12/31/2009

INCOME TAXES

For this reporting period, provide the following:

Federal Taxable Income Reported  
Estimated or Actual Federal Tax Liability

0 - Pass Through  
0 - Pass Through

State Taxable Income Reported  
Estimated or Actual State Tax Liability

0 - Pass Through  
0 - Pass Through

Amount of Grossed-Up Contributions/Advances:

Amount of Contributions/Advances

\_\_\_\_\_

Amount of Gross-Up Tax Collected

\_\_\_\_\_

Total Grossed-Up Contributions/Advances

\_\_\_\_\_

Decision No. 55774 states, in part, that the utility will refund any excess gross-up funds collected at the close of the tax year when tax returns are completed. Pursuant to this Decision, if gross-up tax refunds are due to any Payer or if any gross-up tax refunds have already been made, attach the following information by Payer: name and amount of contribution/advance, the amount of gross-up tax collected, the amount of refund due to each Payer, and the date the Utility expects to make or has made the refund to the Payer.

**CERTIFICATION**

The undersigned hereby certifies that the Utility has refunded to Payers all gross-up tax refunds reported in the prior year's annual report. This certification is to be signed by the President or Chief Executive Officer, if a corporation; the managing general partner, if a partnership; the managing member, if a limited liability company or the sole proprietor, if a sole proprietorship.

  
\_\_\_\_\_  
**SIGNATURE**

Jason Williamson  
\_\_\_\_\_  
**PRINTED NAME**

5/14/10  
\_\_\_\_\_  
**DATE**

Manager  
\_\_\_\_\_  
**TITLE**

**VERIFICATION  
AND  
SWORN STATEMENT**  
Intrastate Revenues Only

**VERIFICATION**

**STATE OF COLORADO**

**I, THE UNDERSIGNED**

**OF THE**

**COUNTY OF (COUNTY NAME): DENVER**

**NAME (OWNER OR OFFICIAL) TITLE: JASON WILLIAMSON, MANAGER**

**COMPANY NAME: RAINBOW PARKS, INC.**

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2009

**HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.**

**SWORN STATEMENT**

**IN ACCORDANCE WITH THE REQUIREMENT OF TITLE 40, ARTICLE 8, SECTION 40-401, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS DURING CALENDAR YEAR 2009 WAS:**

Arizona Intrastate Gross Operating Revenues Only (\$)

\$ 144,612

**(THE AMOUNT IN BOX ABOVE**

**INCLUDES \$ 1,361**

**IN SALES TAXES BILLED, OR COLLECTED)**

**\*\*REVENUE REPORTED ON THIS PAGE MUST INCLUDE SALES TAXES BILLED OR COLLECTED. IF FOR ANY OTHER REASON, THE REVENUE REPORTED ABOVE DOES NOT AGREE WITH TOTAL OPERATING REVENUES ELSEWHERE REPORTED, ATTACH THOSE STATEMENTS THAT RECONCILE THE DIFFERENCE. (EXPLAIN IN DETAIL)**

**SUBSCRIBED AND SWORN TO before me, KATHRYN REYNOLDS,**

**A NOTARY PUBLIC IN AND FOR THE COUNTY OF DENVER, STATE OF COLORADO**

**THIS 14<sup>th</sup> DAY OF May, 2010.**

**MY COMMISSION EXPIRES 2/13/11**

**My Commission Expires 2/13/11**

SIGNATURE OF OWNER OR OFFICIAL

303-333-1250

TELEPHONE NUMBER

SIGNATURE OF NOTARY PUBLIC



**VERIFICATION  
AND  
SWORN STATEMENT  
RESIDENTIAL REVENUE  
Intrastate Revenues Only**

**VERIFICATION**

**STATE OF COLORADO**

**COUNTY OF (COUNTY NAME): DENVER**

**I, THE UNDERSIGNED**

**NAME (OWNER OR OFFICIAL) TITLE: JASON WILLIAMSON, MANAGER**

**COMPANY: RAINBOW PARKS, INC.**

**OF THE**

**DO SAY THAT THIS ANNUAL UTILITY REPORT TO THE ARIZONA CORPORATION COMMISSION**

**FOR THE YEAR ENDING**

MONTH	DAY	YEAR
12	31	2009

HAS BEEN PREPARED UNDER MY DIRECTION, FROM THE ORIGINAL BOOKS, PAPERS AND RECORDS OF SAID UTILITY; THAT I HAVE CAREFULLY EXAMINED THE SAME, AND DECLARE THE SAME TO BE A COMPLETE AND CORRECT STATEMENT OF BUSINESS AND AFFAIRS OF SAID UTILITY FOR THE PERIOD COVERED BY THIS REPORT IN RESPECT TO EACH AND EVERY MATTER AND THING SET FORTH, TO THE BEST OF MY KNOWLEDGE, INFORMATION AND BELIEF.

**SWORN STATEMENT**

IN ACCORDANCE WITH THE REQUIREMENTS OF TITLE 40, ARTICLE 8, SECTION 40-401.01, ARIZONA REVISED STATUTES, IT IS HEREIN REPORTED THAT THE GROSS OPERATING REVENUE OF SAID UTILITY DERIVED FROM ARIZONA INTRASTATE UTILITY OPERATIONS RECEIVED FROM RESIDENTIAL CUSTOMERS DURING CALENDAR YEAR 2009 WAS:

Arizona Intrastate Gross Operating Revenues  
\$ 144,612

THE AMOUNT AT LEFT  
INCLUDES \$ 1,361  
IN SALES TAXES BILLED, OR COLLECTED)

**\*RESIDENTIAL REVENUE REPORTED ON THIS PAGE  
MUST INCLUDE SALES TAXES BILLED.**

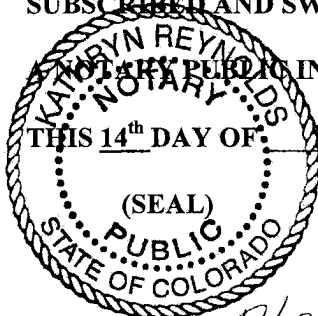
  
SIGNATURE OF OWNER OR OFFICIAL

303-333-1250  
TELEPHONE NUMBER

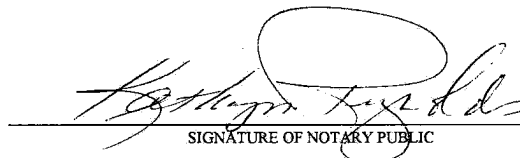
SUBSCRIBED AND SWORN TO BEFORE ME, KATHRYN REYNOLDS,

NOTARY PUBLIC IN AND FOR THE COUNTY OF DENVER, STATE OF COLORADO

THIS 14<sup>th</sup> DAY OF May, 2010



My Commission Expires 2/13/11

  
SIGNATURE OF NOTARY PUBLIC